

FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 90-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- 7675	2. Fiscal Year Covered From: 01 / 01 / 2004 Through 12 / 31 / 2004
3. Name and address of person filing.	
Name Matthew	S. Signature Matthew
P.O. Box, Bldg., Room No., if any	
Street 815 16th St., NW	
City Washington	
State District of Columbia	ZIP Code + 4 20006
5. Position in labor organization. Deputy Director, Civil Rights Dept.	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests
(except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State	ZIP Code + 4
7.b. Amount.	

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed:	On 08/12/2005 Date 08/12/2005 Telephone Number 202-637-3916

Name of Person Filing Matthew Finucane		File Number U-
<p>B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.</p>		
<p>8. Name and address of Business (Including trade name, if any).</p> <p>Name <input type="text"/></p> <p>Trade Name, If any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., If any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>		<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text"/></p> <p>Trade Name, If any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., If any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>		<p>11.a. Nature of such dealing.</p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p>12.b. Amount.</p>
<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>		
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name Asian Pacific AmericanLabor Alliance</p> <p>Trade Name, If any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., If any <input type="text"/></p> <p>Street 888 16th St. NW <input type="text"/></p> <p>City Washington <input type="text"/></p> <p>State District of Columbia <input type="text"/> ZIP Code + 4 20006 <input type="text"/></p>		<p>14.a. Nature of payment.</p> <p>Meals provided during APALA Executive Board meetings to Board members (I serve on the Board):</p> <p>August 20, 2004 Meal, \$17.50 August 20, 2004 Meal, \$34.00</p> <p>TOTAL \$51.50</p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>		<p>14.b. Amount of payment.</p> <p><input type="text"/> \$52</p>